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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/664,681			ing Date 19/2003	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN ALL ENTITY	
	FOR	N	JMBER FIL	.ED NUI	JMBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A		N/A]	N/A		
	SEARCH FEE (37 CFR 1 16(k), (i), e	or (m))	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1,16(o), (p),		N/A		N/A		N/A			N/A		
	FAL CLAIMS CFR 1.16(i))		minus 20 =				x s = 1		OR	xs =		
IND (37	EPENDENT CLAIM CFR 1.16(h))	1S	minus 3 =			ı	x \$ = 1		1	X \$ =		
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$29 addit	If the specification and drawings excesseets of paper, the application size fit is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereo 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.1									
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						ı			1			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL]	TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR		ER THAN ALL ENTITY	
AMENDMENT	06/15/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.150))	· 13	Minus	20	= 0	ı	X \$26 =	0	OR	x s =		
	Independent (37 CFR 1.16(h))	· 2	Minus	3	= 0	ı	X \$110 =	Ö	OR	X \$ =		
	Application Size Fee (37 CFR 1.16(s))											
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())	,	Minus		-	ı	× \$ =		OR	x s =		
DM	Independent (37 OFR 1 16(hl))	*	Minus	***	-		X \$ =		OR	X \$ =		
Ä.	Application Size Fee (37 CFR 1.16(s))					ı			ı			
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					ı			OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
**	" if the entry in column 1 is less than the entry in column 2, write "0" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "MARQUETTA MCGEE/ "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, pocess an application. Confidentially is governed by 80 U.S. U. 2000 Tr. CHT 1.15. In a collection is estimated by take 10 minutes to compete, including gightering, except the compete including gightering. The collection is estimated by take 10 minutes to compete including gightering. The collection of the compete including gightering to compete first form and/or suggestions for reducing the burden, should be sent to the Colle information Office. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, W. 22813-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients p. C.O. Box 1450, Alexandria, VA 22913-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients p. C.O. Box 1450, Alexandria, VA 22913-1450.